PHA Certifications of Compliance with PHA Plans and Related Regulations

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011

PHA Certifications of Compliance with the PHA Plans and Related Regulations: Board Resolution to Accompany the PHA 5-Year and Annual PHA Plan

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the X 5-Year and/or___Annual PHA Plan for the PHA fiscal year beginning 2011, hereinafter referred to as" the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

- 1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.
- 2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.
- 3. The PHA certifies that there has been no change, significant or otherwise, to the Capital Fund Program (and Capital Fund Program/Replacement Housing Factor) Annual Statement(s), since submission of its last approved Annual Plan. The Capital Fund Program Annual Statement/Annual Statement/Performance and Evaluation Report must be submitted annually even if there is no change.
- 4. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
- 5. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
- 6. The PHA certifies that it will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.
- 7. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.
- 8. For PHA Plan that includes a policy for site based waiting lists:
 - The PHA regularly submits required data to HUD's 50058 PIC/IMS Module in an accurate, complete and timely manner (as specified in PIH Notice 2006-24):
 - The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
 - Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;
 - The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;
 - The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).
- 9. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
- 10. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.
- 11. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.

Previous version is obsolete

- 12. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.
- 13. The PHA will take appropriate affirmative action to award contracts to minority and women's business enterprises under 24 CFR 5.105(a).
- 14. The PHA will provide the responsible entity or HUD any documentation that the responsible entity or HUD needs to carry out its review under the National Environmental Policy Act and other related authorities in accordance with 24 CFR Part 58 or Part 50, respectively.
- 15. With respect to public housing the PHA will comply with Davis-Bacon or HUD determined wage rate requirements under Section 12 of the United States Housing Act of 1937 and the Contract Work Hours and Safety Standards Act.
- 16. The PHA will keep records in accordance with 24 CFR 85.20 and facilitate an effective audit to determine compliance with program requirements.
- 17. The PHA will comply with the Lead-Based Paint Poisoning Prevention Act, the Residential Lead-Based Paint Hazard Reduction Act of 1992, and 24 CFR Part 35.
- 18. The PHA will comply with the policies, guidelines, and requirements of OMB Circular No. A-87 (Cost Principles for State, Local and Indian Tribal Governments), 2 CFR Part 225, and 24 CFR Part 85 (Administrative Requirements for Grants and Cooperative Agreements to State, Local and Federally Recognized Indian Tribal Governments).
- 19. The PHA will undertake only activities and programs covered by the Plan in a manner consistent with its Plan and will utilize covered grant funds only for activities that are approvable under the regulations and included in its Plan.
- 20. All attachments to the Plan have been and will continue to be available at all times and all locations that the PHA Plan is available for public inspection. All required supporting documents have been made available for public inspection along with the Plan and additional requirements at the primary business office of the PHA and at all other times and locations identified by the PHA in its PHA Plan and will continue to be made available at least at the primary business office of the PHA.
- 21. The PHA provides assurance as part of this certification that:
 - (i) The Resident Advisory Board had an opportunity to review and comment on the changes to the policies and programs before implementation by the PHA;
 - (ii) The changes were duly approved by the PHA Board of Directors (or similar governing body); and
 - (iii) The revised policies and programs are available for review and inspection, at the principal office of the PHA during normal business hours.
- 22. The PHA certifies that it is in compliance with all applicable Federal statutory and regulatory requirements.

NE153 PHA Number/HA Code
- 2012
fed in the accompaniment herewith, is true and accurate. Warning: HUD will enalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)
Title
Chairperson
Date: December 17, 2010

Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

a brug-Free workplace					
Applicant Name					
Douglas County Housing Authority					
Program/Activity Receiving Federal Grant Funding					
Agency Annual Plan Transmission					
Acting on behalf of the above named Applicant as its Authoriz the Department of Housing and Urban Development (HUD) regard	ed Official, I make the following certifications and agreements to				
I certify that the above named Applicant will or will continue to provide a drug-free workplace by:	(1) Abide by the terms of the statement; and				
a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use	(2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;				
of a controlled substance is prohibited in the Applicant's work- place and specifying the actions that will be taken against employees for violation of such prohibition.	e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction.				
b. Establishing an on-going drug-free awareness program to inform employees	Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on				
(1) The dangers of drug abuse in the workplace;	whose grant activity the convicted employee was working, unless the Federalagency has designated a central point for the				
(2) The Applicant's policy of maintaining a drug-free workplace;	receipt of such notices. Notice shall include the identification number(s) of each affected grant;				
(3) Any available drug counseling, rehabilitation, and employee assistance programs; and	f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect				
(4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.	to any employee who is so convicted (1) Taking appropriate personnel action against su				
c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement	employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or				
required by paragraph a.; d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will	(2) Requiring such employee to participate satisfacto- rily in a drug abuse assistance or rehabilitation program ap- proved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;				
	g. Making a good faith effort to continue to maintain a drug free workplace through implementation of paragraphs a. thru				
 Sites for Work Performance. The Applicant shall list (on separate p HUD funding of the program/activity shown above: Place of Perfor Identify each sheet with the Applicant name and address and the program. 	ages) the site(s) for the performance of work done in connection with the mance shall include the street address, city, county, State, and zip code. ogram/activity receiving grant funding.)				
5404 No. 107th Plaza Omaha, NE 68134	, , , , , , , , , , , , , , , , , , ,				
Check hereif there are workplaces on file that are not identified on the attack	ched sheets.				
I hereby certify that all the information stated herein, as well as any inf Warning: HUD will prosecute false claims and statements. Conviction may (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)	ormation provided in the accompaniment herewith, is true and accurate. y result in criminal and/or civil penalties.				
Name of Authorized Official Joan Bertolini	Title CEO				
Signature	Date				
De Bestuly	December 17, 2010				

Certification of Payments to Influence Federal Transactions

U.S. Department of Housing and Urban Development Office of Public and Indian Housing

Applicant Name	
Douglas County Housing Authority	
Program/Activity Receiving Federal Grant Funding CFP - Capital Fund Program	
The undersigned certifies, to the best of his or her knowledge an	d belief, that:
(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement. (2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying, in accordance with its instructions.	(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.
I hereby certify that all the information stated herein, as well as any inf Warning: HUD will prosecute false claims and statements. Conviction ma (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)	formation provided in the accompaniment herewith, is true and accurate. By result in criminal and/or civil penalties.
Name of Authorized Official	Title
Joan Bertolini	CEO
Signature	Date (mm/dd/yyyy)
Joan Belline	12/17/2010

DISCLOSURE OF LOBBYING ACTIVITIES

Approved by OMB 0348-0046

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352

(See reverse for public burden disclosure.)

1. Type of Federal Action:	2. Status of Federa	al Action:	3. Report Type:			
b a. contract	b a. bid/o	ffer/application	a a. initial fil	ing		
b. grant		l award	b. materia			
c. cooperative agreement	c. post-	-award	For Material Change Only:			
d. loan	ļ.			quarter		
e. loan guarantee				st report		
f. loan insurance			3010 01 100			
4. Name and Address of Reporting	Entity:	5. If Reporting En	tity in No. 4 is a Si	ubawardee, Enter Name		
▼ Prime	,	and Address of		and war acc, mile i tallic		
	if known:					
Congressional District, if known		Congressional I	District, if known:	2		
6. Federal Department/Agency:			m Name/Description			
- ·	-1		•			
Department of Housing & Urban Dev	eropment	CFP - Capital Fund Program				
·		CFDA Number. i	f applicable:			
		İ		A Company of the Comp		
8. Federal Action Number, if known	•	9. Award Amount	, if known:			
		\$				
10. a. Name and Address of Lobby	ing Desigtuent					
(if individual, last name, first na				including address if		
None reported	irrie, ivii).	different from N	•			
None reported		(last name, first	name, IVII):			
			-			
lafore Him and the later than the la		<u> </u>				
 Information requested through this form is authorized 1352. This disclosure of lobbying activities is a mate 	rial representation of fact	Signature:	in I Jerk	len		
upon which reliance was placed by the tier above when or entered into. This disclosure is required pursuant	this transaction was made	Print Name: Joan I	3ertolini			
information will be reported to the Congress semi-annua	lly and will be available for	Title: CEO				
public inspection. Any person who fails to file the re subject to a civil penalty of not less that \$10,000 and n	quired disclosure shall be ot more than \$100,000 for					
each such failure.		Telephone No.: 40	2-444-6227	Date: 12/17/10		
Fodoral Bas Onlin				Authorized for Local Reproduction		
Federal Use Only:				Standard Form III (Rev. 7-97)		



STATE OF NEBRASKA

DEPARTMENT OF ECONOMIC DEVELOPMENT

301 Centennial Mall South
P.O. Box 94666
Lincoln, Nebraska 68509-4666 USA
Phone (402) 471-3111
Toll Free (800) 426-6505
Fax (402) 471-3778
Statewide Relay (800) 833-0920 (voice)
www.neded.org

October 25, 2010

Joan Bertolini, CEO Douglas County Housing Authority 5404 No. 107th Plaza Omaha, NE 68134

RE: Statement of Consistency with the Consolidated Plan for One and Five Year Agency Plan

Dear Ms. Bertolini:

This is to certify that the Housing Needs identified in your Agency Plan as submitted on October 15, 2010 is consistent with the Department of Economic Development's current Housing and Community Development Consolidated Plan, and our Analysis of Impediments to Fair Housing Choice.

We wish you the best in accomplishing the goals and objectives identified in your submission.

If you have any questions please contact me at (800) 426-6505, (402) 471-2095 or bob.doty@nebraska.gov.

Sincerely,

Bob Doty

Housing Manager

Community and Rural Development Division

Enclosure

Certification by State or Local Official of PHA Plans Consistency with the Consolidated Plan

l,	Bob Doty	the	Housing Mar	nager	certify	that	the	Five	Year	and
Annua	l PHA Plan of the	Douglas County H	lousing Authority	is consiste						
the Sta	ite of Nebraska	prepared i	pursuant to 24	CFR Part	91.					

Signed / Dated by Appropriate State or Local Official

10-25-2010

Part I	: Summary							
PHA N		rant Type and Number	NEW FORM FORM OF		FI	Y of Grant:		
Douglas County Housing Authority Capital Fund Program Grant No: NE153P153501-08 Replacement Housing Factor Grant No:						08		
5404 N	No. 107th Plaza, Omaha, NE 68134	ate of CFFP:	FP: FFY of					
Type of Grant								
Orig	inal Annual Statement Reserve for Disa	sters/Emergencies	Pavicad Annu	al Statement (revision no:				
⊠ Perf	ormance and Evaluation Report for Period Ending: 9/3	30/10	Final Perform	nance and Evaluation Report	!			
Line	Summary by Development Account		Total Estimated Cost	1	Total A	ctual Cost 1		
		Origin	ıal Re	evised ²	Obligated	Expended		
1	Total non-CFP Funds					23,703,200		
2	1406 Operations (may not exceed 20% of line 21) 3	\$42000		\$42000		\$42000		
3	1408 Management Improvements	\$3000		\$-0-	***************************************	\$-0-		
4	1410 Administration (may not exceed 10% of line 21)	\$6500		\$-0-	H1444444444444444444444444444444444444	\$-0-		
5	1411 Audit							
6	1415 Liquidated Damages							
7	1430 Fees and Costs							
8	1440 Site Acquisition							
9	1450 Site Improvement	\$14175		\$5,712.79	}	\$5,712.79		
10	1460 Dwelling Structures	\$34356		\$61,859.5	6	\$61,859.56		
11	1465.1 Dwelling Equipment—Nonexpendable	\$3400		\$2,319.00)	\$2,319.00		
12	1470 Non-dwelling Structures	\$5103		\$-0-	**************************************	\$-0-		
13	1475 Non-dwelling Equipment	\$3500		\$142.65		\$142.65		
14	1485 Demolition				***************************************			
15	1492 Moving to Work Demonstration				***************************************			
16	1495.1 Relocation Costs				· · · · · · · · · · · · · · · · · · ·			
17	1499 Development Activities 4							
18a	1501 Collateralization or Debt Service paid by the PHA							
18ba	9000 Collateralization or Debt Service paid Via System of	f Direct						
	Payment							
19	1502 Contingency (may not exceed 8% of line 20)							
20	Amount of Annual Grant: (sum of lines 2 - 19)	\$112034		\$112034		\$112034		
21	Amount of line 20 Related to LBP Activities							
22	Amount of line 20 Related to Section 504 Activities				**************************************			
23	Amount of line 20 Related to Security - Soft Costs							
24	Amount of line 20 Related to Security - Hard Costs							
25	Amount of line 20 Related to Energy Conservation Measu	res						

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program

Part I: Summary									
PHA Name: Grant Type and Number FFY of Grant:									
Douglas County Housing Authority	Unity Housing Authority Capital Fund Program Grant No: NE26P153501-08 Replacement Housing Factor Grant No: 2008 FFY of Grant Approval								
Type of Grant Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:) Performance and Evaluation Report for Period Ending: 9/30/10 Final Performance and Evaluation Report									
Line Summary by Development Account		Tota	ıl Estimated Cost	Tot	al Actual Cost 1				
		Original	Revised ²	Obligated	Expended				
Signature of Executive Director Date 12/17/10 Signature of Public Housing Director Date									

or Grant No: pment Quanti at No. 06 08 10 50 50	Original \$42000 \$3000 \$6500 \$14175	Revised 1	Funds Obligated ² \$42000 \$-0- \$-0- \$5,712.79	Funds Expended ² \$42000 \$-0- \$-0- \$5,712.79	Status of Worl
08 10 50 60	\$42000 \$3000 \$6500 \$14175	Revised 1	Obligated ² \$42000 \$-0-	Expended ² \$42000 \$-0-	
08 10 50 60	\$3000 \$6500 \$14175		\$42000 \$-0- \$-0-	\$-0- \$-0-	
10 50 60	\$6500 \$14175		\$-0-	\$-0-	
50 60	\$14175			1	
30			\$5,712,79	\$5 712 7Q	
· ·	604056				
	\$34356		\$61,859.56	\$61,859.56	
5.1	\$3400		\$2,319.00	\$2,319.00	
70	\$5103		\$-0-	\$-0-	
75	\$3500		\$142.65	\$142.65	
as a second seco					

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement. ² To be completed for the Performance and Evaluation Report.

Part I: S	ummary					
PHA Nam	e: Douglas County Hoiusing	1	FFY of Grant: 2009			
	107th Plaza		FFY of Grant Approval:			
Omaha, N	E 68134	Sapital Fund Program Grant No: NE26S153 Seplacement Housing Factor Grant No:	330109			
ŀ		Date of CFFP:			**************************************	
Type of G		ate of Ci ii.				
Origin		Reserve for Disasters/Emergencies	Į.	Revised Annual Statement (revis	ion no:	
⊠ Perfor	mance and Evaluation Report for	Period Ending: 09/30/10	'	Final Performance and Evalua		
Line	Summary by Development Acc		Total E	stimated Cost		Actual Cost 1
			Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds					
2	1406 Operations (may not exceed	1 20% of line 21) ³	\$14,000	-0-	-0-	-0-
3	1408 Management Improvements	S				
4	1410 Administration (may not ex	ceed 10% of line 21)				
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs					
8	1440 Site Acquisition					
9	1450 Site Improvement					·
10	1460 Dwelling Structures		\$127,812	\$141,812	\$141,812	\$141,812
11	1465.1 Dwelling Equipment—No	onexpendable				
12	1470 Non-dwelling Structures					
13	1475 Non-dwelling Equipment					
14	1485 Demolition					
15	1492 Moving to Work Demonstra	ation				
16	1495.1 Relocation Costs					
17	1499 Development Activities 4					

¹ To be completed for the Performance and Evaluation Report.

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Expires 4/30/2011

	Summary					
PHA Nam Doglas Co Housing A	Grant Type and Number Conital Found Program Count No. 2012/61/52/50100				FFY of Grant:2009 FFY of Grant Approval:	
Type of G	rant					
	inal Annual Statement Reserve for Disasters/Emergen	cies		☐ Re	rised Annual Statement (revision no:)
	ormance and Evaluation Report for Period Ending: 09/30/10			1	inal Performance and Evaluation Report	
Line	Summary by Development Account		Total Estimate		Total A	Actual Cost 1
		Origina	l	Revised 2	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA					
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment					
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant:: (sum of lines 2 - 19)	\$141,812	\$	141,812		
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Activities					
23	Amount of line 20 Related to Security - Soft Costs					
24	Amount of line 20 Related to Security - Hard Costs					
25	Amount of line 20 Related to Energy Conservation Measures	\$141,812	\$	141,812		
1 7	Te of Executive Director Date	12/17/10	Signature	of Public Hor	ising Director	Date

¹ To be completed for the Performance and Evaluation Report.

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Part II: Supporting Page									. , , , , , , , , , , , , , , , , , , ,
PHA Name: Douglas County Housing Authority			Ype and Number Fund Program Grant No Yes/ No): 2009 ment Housing Factor G			Federal	FFY of Grant: 2	009	
Development Number Name/PHA-Wide Activities	General Description of Major Categories	Work	Development Account No.	Quantity	Total Estim	ated Cost	Total Actual	Cost	Status of Work
					Original	Revised 1	Funds Obligated ²	Funds Expended ²	
NE153000006	Vinyl Siding and insulation on sir family houses	_	1460	17	\$127,812	\$141,812	\$79,286.66	\$79,286.66	Done
NE153000006	Energy efficient windows installe North Acres Eldelry Complex		1460	180			\$54,485.34	\$54,485.34	Done
NE153000006	Stucco siding repair at North Acre Elderly Complex	≑s	1460	11			\$8,040.00	\$8,040.00	dONE
NE153000006	Phyusical Needs Assessment		1410		\$14,000	-0-	-0-	-0-	

[‡] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program

Part II: Supporting Pages									
PHA Name:	Capital F	ype and Number Fund Program Grant No (es/ No): nent Housing Factor G	rant No:		Federal	FFY of Grant:			
Development Number Name/PHA-Wide Activities	General Description of Major Categories	Work	Development Account No.	Quantity	Total Estim	ated Cost	Total Actual	Cost	Status of Work
					Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
		. ,		 					
				ļ					

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Sch	edule for Capital Fund	Financing Program			
PHA Name: Douglas County	Housing Authority				Federal FFY of Grant: 2009
Development Number Name/PHA-Wide Activities		1 Obligated Ending Date)		s Expended Ending Date)	Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
NE153000006	3/31/2010		3/31/2011 (60%)		
			3/31/2012 (100%)		
······································					
			,		

Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

	Summary	-	****			Expires 4/30/20
'HA Na 6404 No NE 6813	nne: Douglas County Housing . 107 th Plaza, Omaha, 4	Grant Type and Number Capital Fund Program Grant No: 1 Replacement Housing Factor Grant Date of CFFP:	NE26P153501-09 nt No:			FFY of Grant: 2009 FFY of Grant Approval: 2009
Perfe	inal Annual Statement ormance and Evaluation Report	Reserve for Disasters/Emergene for Period Ending: 09/30/10	cies	☐ Revised Annual Statem ☐ Final Performance a	ent (revision no:	
ine	Summary by Development	Account		Total Estimated Cost		Total Actual Cost 1
	Total non-CFP Funds		Original	Revised ²	Obligated	Expended
	1406 Operations (may not exc	,	\$42,000	\$42,000	\$42,000	\$42,000
	1408 Management Improvem	ents	\$3,000	\$-0-	Ψ12,000	\$42,000
	1410 Administration (may not	exceed 10% of line 21)	\$6,500		00000	
	1411 Audit		40,300	\$6,500	\$6,500	\$6,500
, ,	1415 Liquidated Damages					
	1430 Fees and Costs					
	1440 Site Acquisition					
	1450 Site Improvement	***************************************	\$21,531.	\$7,286	\$5,042.14	\$5,040,14
)	1460 Dwelling Structures		\$37,659	\$54,692		\$5,042.14
	1465.I Dwelling Equipment—	-Nonexpendable			\$51,991.63	\$51,991.63
	1470 Non-dwelling Structures		\$3,200	\$4,916	\$4,599.00	\$4,599.00
}	1475 Non-dwelling Equipmen	<u> </u>	\$3,000	\$3,047	\$3,047.00	\$3,047.00
ļ	1485 Demolition		\$3,500	\$1,949	\$1,949.00	\$1,949.00
	1492 Moving to Work Demon	stration				
	1495.1 Relocation Costs					
7	I499 Development Activities 4					

¹ To be completed for the Performance and Evaluation Report.

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Part I: S	ummary				· ······	
PHA Nam Douglas C Houisng	**			FFY of Grant:20 FFY of Grant A		· .
	nal Annual Statement	ies	⊠ Re	vised Annual Sta	tement (revision no: 1)
	rmance and Evaluation Report for Period Ending:		☐ Fir	nal Performance a	and Evaluation Report	t
Line	Summary by Development Account		Total Estimated Cost		Tot	al Actual Cost ¹
		Origina	I Revised ²		Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA					
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment					
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant:: (sum of lines 2 - 19)	\$120,390	\$120,390	\$11	5,128.77	\$115,128.77
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Activities					
23	Amount of line 20 Related to Security - Soft Costs					
24	Amount of line 20 Related to Security - Hard Costs					
25	Amount of line 20 Related to Energy Conservation Measures					
	e of Executive Director Joan Bertolini	Date	Signature of Public Ho	using Director	•	Date
12/17/19	Zon Bertoline					

¹ To be completed for the Performance and Evaluation Report.

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Part II: Supporting Page	es									
			ype and Number Fund Program Grant N (es/ No): No nent Housing Factor ()1-09	Federal	Federal FFY of Grant: 2009			
Development Number Name/PHA-Wide Activities	General Description of Major V Categories	Work	Development Account No.	Quantity	Total Estir	mated Cost	Total Actual	Cost	Status of Work	
					Original	Revised ¹	Funds Obligated ²	Funds Expended ²		
NE153000006							Obligated	Expended		
PHA Wide	PHA Wide Work Items:									
	Deck & Driveway Repairs and La	nscape	1450	2	\$500	\$3,286	\$5,042.14			
	Concrete & Asphalt Repairs		1450	2	\$2400	\$4,000	1 , , , , , , , , , , ,			
	Tree trimming		1450	2	-0-	\$-0-				
	Water Heaters		1460	2	\$800	\$-0-	-0-			
	Flooring (Vinyl & Carpeting)		1460	14	\$13699	\$15,088	\$21,219.29			
	Doors (Exterior & Interior)		1460	10	\$600	\$5,690	\$9,968.74			
	Faucets, Plumbing & Misc. Rehab	work	1460	22	\$1000	\$17,079	\$7,771.75			
	Exterior & Interior Painting		1460	9	\$2500	\$5,600	\$4,990.00			
	Windows		1460	4	\$-0-	\$6,235	\$6,234.85			
	Air Conditioners & Furnaces		1460	2	\$6000	\$5,000	\$1,825.00			
	Furnances		1460	0	\$8000	\$-0-		***************************************		
	Window Covering		1460	2	\$600	\$-0-				
42	Siding Houses		1460	2	\$14185	\$-0-				
	Stucco Repairs		1460	1	-0-	\$-0-				
	Sprinkler Repairs		1460	1	\$1000	\$-0-				

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

PHA Name: Douglas Co	anty Haviena	Cront 7	Company Normalism			T 15 1 1 1	DOM CO	0.00		
PHA Name: Douglas County Houisng		Grant Type and Number Capital Fund Program Grant No: NE26P153501-09 CFFP (Yes/ No): Replacement Housing Factor Grant No:					Federal FFY of Grant: 2009			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories		ork Development Account No.	Quantity	Total Estir	nated Cost	Cost Total Actual Cost		Status of Work	
					Original	Revised 1	Funds Obligated ²	Funds Expended ²		
	Refrigerators		1465	4	\$1000	\$-0-	1			
	Ovens		1465	4	\$800	\$-0-				
	Dishwashers		1465	0	\$-0-	\$-0-				
	Appliances		1465	5		\$4,916	\$4,599.00			
Central Office	Central Office Parking Resurfacing		1470	1	\$-0-	\$3,047	\$3,047.00			
Central Office	Building Repairs		1470	1	\$5000	\$-0-				
	General Operations		1406	1	\$42000	\$42,000	\$42,000.00			
	Upgrade Software & Training		1408	1	\$3000	\$-0-				
	Office Equipment & Furnishings		1475	1	\$3500	\$1,949	\$1,949.00			
	Coordination & Administration of	CFP	1410	1	\$6500	\$6,500	\$6,500.00			
						· · · · · · · · · · · · · · · · · · ·				

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part I:	Summary	· · · · · · · · · · · · · · · · · · ·			
PHA N		. T	-		
	- Cria	nt Type and Number oital Fund Program Grant No:	NE26P5350110 B1		FFY of Grant:
5404 N	lo 107th Diago Omobe NE codad Dat	e of CFFP:	NE26P5350110 Replacement Housing Fa	ctor Grant No:	2010
	Totar , raza, officiala, raz 00104	***************************************			FFY of Grant Approval:
Type of					
∐Orig ⊠nc	inal Annual Statement Reserve for Disas	ters/Emergencies	Revised Annual Statement (rev		
Line	ormance and Evaluation Report for Period Ending: 09/3	50/10	Final Performance and Evalua	tion Report	
Lane	Summary by Development Account		Total Estimated Cost	Ter	tal Actual Cost 1
1	Total non-CFP Funds	Origina	ıl Revised ²	Obligated	Expended
2	1406 Operations (may not exceed 20% of line 21) ³	\$35,000			
3	1408 Management Improvements	\$35,000	\$35,000 -0-	\$35,000	\$35,000
4	1410 Administration (may not exceed 10% of line 21)	\$6,000			
5	1411 Audit	40,000	\$6,000		
6	1415 Liquidated Damages				
7	1430 Fees and Costs		·		
8	1440 Site Acquisition		·		
9	1450 Site Improvement	\$14,800	\$13,671	E9	
10	1460 Dwelling Structures	\$20,400	\$23,400		
11	1465.1 Dwelling Equipment—Nonexpendable	\$3,200	\$3,200		
12	1470 Non-dwelling Structures	\$2,000	\$32,000		
13	1475 Non-dwelling Equipment	\$5,990	\$5,990		
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities 4	\$30,000	-0-		
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of I Payment	Direct			
19					
20	1502 Contingency (may not exceed 8% of line 20) Amount of Annual Grant: (sum of lines 2 – 19)	0400 000			
21	Amount of Annual Grant: (sum of lines 2 – 19) Amount of line 20 Related to LBP Activities	\$120,390	\$119,261		
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security – Soft Costs				
24	Amount of line 20 Related to Security – Soit Costs Amount of line 20 Related to Security – Hard Costs				
24 25	Amount of line 20 Related to Security – Hard Costs Amount of line 20 Related to Energy Conservation Measure				
		3		1	

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program

Part I: Summary						
PHA Name:	Capital Func	and Number d Program Grant No: NE26P1		FFY of Grant: 2010		
Douglas County Housing Authority	Date of CFF	P:	-		FFY of Grant Approval:	
☑Performance and Evaluation Report for Period Ending	or Disasters/Eme g: <u>09/30/10</u>		□Revised Annual Statement (revi □Final Performance and Evaluati			
Line Summary by Development Account		Teta	d Estimated Cost	Total	Total Actual Cost 1	
	****	Original	Revised ²	Obligated	Expended	
Signature of Executive Director		Date 12/17/2010	Signature of Public Housing	Director	Date	

PHA Name:		Grant Type and I	Number				Federal FFY of	Grant:	
Douglas County H	ousing	Capital Fund Prog	ogram Grant No: ousing Factor Grant No:		CFFP (Y	CFFP (Yes/No): Yes		Giant,	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories PHA Wide Work Items:		Development Account No.	Quantity	Total Estimated Cost		Total Ac	Status of Work	
NE153000006					Original	Revised 1	Funds Obligated ²	Funds Expended ²	
	General Operations		1406	1	\$35,000	\$35,000	\$35,000	\$35,000	
·····	Coordination & Admir		1410	1	\$6,000	\$6,000			
	Computer Softwar		1408	1	\$3,000	\$0			
	Community Center F		1470	1	\$2,000	\$12,000			
	Central Office Ref	nab & Repair			0	\$20,000		***************************************	
	Deck Rep	pairs	1450	2	\$1,000	\$1,000			<u> </u>
	Concrete & Asph	alt Repairs	1450	2	\$13,800	\$12,671			
	Water Hea	aters	1460	1	\$400	\$400			
	Exterior Pa	inting	1460	1	\$1,000	\$1,000			
	Carpetin	ng	1460	5	\$6,000	·			
	Storndoo		1460	0	\$0	\$0		····	
***************************************	Interior Pai	nting	1460	6	\$1,000	\$1,500		***************************************	
	Vinyl Floo		1460	5	\$1,500	\$2,500			***************************************
	Air Condition	oners	1460	2	\$5,000	\$5,000			
······································	Furnace		1460	2	\$5,500	\$5,500			
	Stucco Re	·	1460	0	\$0	\$0			
	Sprinkler Re	epairs	1460	0	\$0	\$0			

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement. ² To be completed for the Performance and Evaluation Report.

PHA Name: Douglas County Ho	busing	Grant Type and Capital Fund Pro Replacement Hou	Number gram Grant No: using Factor Grant	No:	CFFP	Federal FFY of Grant: 2010			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories		Development Account No.	Quantity	Total Estimated Cost		Total Actu	Status of Work	
NE153000006	PHA Wide Wo				Original	Revised 1	Funds Obligated	Funds Expended ²	
	Refrigera		1465	4	\$1,800	\$1,800			
	Ovens	-	1465	4	\$1,400	\$1,400			
	Office equipment	/furnishings	1475	1	\$5,990	\$5,990			
CFFP	Mortgage Payment	New Central		1	\$30,000	\$0			
	Total					\$119,261			

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement. ² To be completed for the Performance and Evaluation Report.

Part I:	Summary				
PHA No Dougla 5404 N	es County Housing Authority Ca	unt Type and Number pital Fund Program Grant No: NE te of CFFP:	E26P5350111 Replacement Housing Fac	etor Grant No:	FFY of Grant: 2011 FFY of Grant Approval:
Perfe	inal Annual Statement	ters/Emergencies	□Revised Annual Statement (rev □Final Performance and Evaluat	ion Report	
Line	Summary by Development Account		Total Estimated Cost		l Actual Cost 1
	,	Original_	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) 3	\$45,000			
3	1408 Management Improvements	\$3,000			
4	1410 Administration (may not exceed 10% of line 21)	\$6,000			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	\$7,500		9	
10	1460 Dwelling Structures	\$34,890			
11	1465.1 Dwelling Equipment—Nonexpendable	\$1,500			
12	1470 Non-dwelling Structures	\$1,500			
13	1475 Non-dwelling Equipment	\$21,000			4
14	1485 Demolition				·
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities 4		-0-		
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of	Direct			
	Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2 – 19)	\$120,390			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security – Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measur	es			

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program

Part I: Summary					
PHA Name: Douglas County Housing Authority	Grant Type a Capital Fund I Date of CFFP	Program Grant No: NE26P	15350111 Replacement Housing Factor	r Grant No:	FFY of Grant: 2011 FFY of Grant Approval:
Type of Grant ☑Original Annual Statement □Reserve t □Performance and Evaluation Report for Period Endin	for Disasters/Emer ig:	gencies	☐Revised Annual Statement (revise☐Final Performance and Evaluation	,	
Line Summary by Development Account		Tota	al Estimated Cost		Total Actual Cost 1
		Original	Revised ²	Obligated	l Expended
Signature of Executive Pirretor		Date 1/18/2011	Signature of Public Housing	Director	Date

Part II: Supporting	Pages									
PHA Name: Douglas County H	ousing	Grant Type and I Capital Fund Prog Replacement Hou		No:	CFFP (Y	es/No): Yes	Federal FFY of 2010	Federal FFY of Grant: 2010		
Development Number Name/PHA-Wide Activities	General Description Categor	of Major Work	Development Account No.	Quantity	Total Estimated Cost		Total Ac	Status of Worl		
NE153000006	PHA Wide Work Items:				Original	Revised 1	Funds Obligated ²	Funds Expended ²		
	General Operations		1406	1	\$45,000	100				
	Coordination & Admir			1	\$6,000					
	Computer Softwa		1408	1	\$3,000				***************************************	
	Community Center F		1470	1	\$1,500	***************************************				
	Central Office Rel		1470	1	\$0	. 6				
	Tree Trim		1450	1	\$1,000					
	Deck Rep		1450	2	\$2,000					
	Concrete & Asph	nalt Repairs	1450	2	\$4,500			***************************************		
	Water Hea	aters	1460	2	\$700					
	Exterior Pa	iinting	1460	2	\$1,000					
	Carpeti	ng	1460	5	\$9,000	***************************************		***************************************		
***	Storndo		1460	2	\$400			***************************************	***************************************	
	Interior Pa		1460	4	\$2,500				*****	
	Vinyl Floo		1460	4	\$2,000	****		*****		
	Air Condition	oners	1460	3	\$8,250	****				
	Furnace		1460	3	\$8,250	*****				
	Pest Con		1460	1	\$1,000				***************************************	
	Sprinkler Re		1460	1	\$790			*****	***************************************	
	Faucets & Pl	umbing	1460	4	\$1,000			*	***************************************	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement. ² To be completed for the Performance and Evaluation Report.

Part II: Supporting	rages								
PHA Name: Douglas County Ho	using	Grant Type and Capital Fund Pro Replacement Ho	Number Igram Grant No: CFFP (Yes/ No): Yes using Factor Grant No:				Federal FFY of Grant: 2010		
Development Number Name/PHA-Wide Activities General Description of Major W Categories		of Major Work	Development Account No. Quantity		Total Estimated Cost		Total Actual Cost		Status of Work
NE153000006	PHA Wide Work Items:				Original	Revised 1	Funds Obligated	Funds Expended ²	
	Refriger		1465	2	\$800				
****	Over		1465	2	\$700				
	Office equipmer		1475	1	\$1,000				
	Maintenance	Equipment	1475	11	\$20,000				
	Total	***********			\$120,390				
		·							
									
							····		
	·····								

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement. ² To be completed for the Performance and Evaluation Report.

PHA Name:					Federal FFY of Grant:
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

AMINISTER OF THE STATE OF THE S					

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

HA Name:					Federal FFY of Grant:
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

PHA 5-Year and Annual Plan

U.S. Department of Housing and Urban Development Office of Public and Indian Housing

OMB No. 2577-0226 Expires 4/30/2011

1.0	PHA Information PHA Name: Douglas County Housing Aut	la omitro			DITA Coder NE152		
		Performing	EVE 2007	Standard	PHA Code: <u>NE153</u> HCV (Section 8)	
	PHA Fiscal Year Beginning: (MM/YYYY):		F 1 E 2007 L		I He v (Section 8	,	
	Till Tiscar Tear Beginning. (MM) 1111).	04/2011					
2.0	Inventory (based on ACC units at time of F	Y beginning	in 1.0 above)				
	Number of PH units: 78	0 0		Number of H	CV units: <u>1018</u>		
3.0	Submission Type						
		Annual l	Plan Only		5-Year Plan Only		
4.0							
4.0	PHA Consortia	HA Consortia	a: (Check box if su	bmitting a joi	nt Plan and complete table bel	ow.)	
						No. of Unit	ts in Each
	Participating PHAs	PHA	Program(s) Incl	uded in the	Programs Not in the	Program	is in Each
	1 articipating 1 11/45	Code	Consortia		Consortia	PH	HCV
	PHA 1:					111	THE V
	PHA 2:						
	PHA 3:						
	5-Year Plan. Complete items 5.1 and 5.2 or	ly at 5-Year	Plan update. Since	the DCHA r	ecently developed new Missio	n. Vision and	Values
5.0	Statements as well as developing new Goals						,
	rg.		.				
5.1	Mission. State the PHA's Mission for serving	ng the needs	of low-income, ver	y low-income	e, and extremely low income fa	milies in the P	'HA's
	jurisdiction for the next five years:						
	MISSION: The mission of the Douglas Co						sting the
	low-income family, elderly, and disabled i	esidents tha	t are striving to a	chieve self-su	fficiency or independent livi	ng.	
	VICION EL C. C. C.	TT	41	. 1 66 1 . 1			
	VISION: The vision of the Douglas Count subdivisions and small community jurisdi						
	responsive to rapidly changing developme						
	social, technological and demographic inf						
	DCHA mission. Board/executive policies,						
	necessary to advance its housing vision.)pportunities	s for partnerships	will also be i	maximized to ensure collabor	ration, funds l	everaging.
	and competency sharing.	FF	F				
	1 0						
	VALUES: In addition to the values of sel	f-sufficiency	or independent li	ving, residen	ts will be provided with hous	ing choices th	at are free of
	housing discrimination. Housing sites and					lards for urba	n design and
	energy conservation. Programs and servi						
5.2	Goals and Objectives. Identify the PHA's						
	low-income, and extremely low-income fam		ext five years. Inc	lude a report	on the progress the PHA has n	nade in meeting	g the goals
	and objectives described in the previous 5-Y		- C J: J4-			4b	1)
	1. DCHA will strive for long-term its awareness and utilization of						
	tapping its discretionary HUD:				, private lenders, etc.), (2) le	craging its as	scus, (3)
	2. DCHA will collaborate with the				the greater Omaha metropol	litan area in r	edefining the
	jurisdictional boundaries, iden						
	and office space options that we	ould better a	llow the agency to	be more pro	pactive in meeting the changi	ng housing dy	namics of
	the Omaha area. DHCA will st						
	(supportive services agencies, e					rtners, etc.) th	ıat
	significantly impact, directly or						_
	3. DCHA will enhance the quality		•		, ,	0 /	
	demographic trends and patter	_			0,	,	
	lifestyles, household composition		gmg/uisabieu pop	uiauons, etc.,	and by better responding w	iai nousing al	iu services
	that factor in these trends and jud. 4. DCHA will expand its public in		ncy profile throu	gh the greate	r marketing and community	engagement (of its hoard
	and staff in communicating the						
	its communities, its businesses,			vectines of the	and non time impac	on the quan	of me or
	5. DCHA will ensure that its strat			s board in fo	rmulating board policies, str	ategic thinkin	g, and Chief
	Executive Officer (CEO) perform						
			-	-			
l							

	PHA Plan Update
	(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: There have been no substantial changes to the PHA plan elements since the last Annual Plan was submitted. Minor changes in the ACOP are listed below:
	AMENDED: JANUARY 2009 Section 8.4 grounds for denial – changed the number of years for denial for drug related activity from five to three years; section 8.5 informal review – changed the number of days an applicant has to request an informal review from 10 business days to 14 business days.
	AMENDED: MARCH 2010 Section 8.0 eligibility for admission – under 8.2 eligibility criteria, a. Family status, #7. Student eligibility / f. Corrected effective date from November 30, 2006 to November 30, 2005 Section 8.0 eligibility for admission – under 8.2 eligibility criteria, d. Social security number documentation / added 60 day limit on providing the ss# documentation.
6.0	AMENDED: SEPTEMBER 2010 Section 13.8 paying rent – adding chronic late payment counseling requirement Section 15.0 recertification – added a statement to include conducting annual criminal background checks Section 17.4 special inspections – added 6 month housekeeping inspection bullet Section 19 repayment agreements – removed the extension of the repayment period for amounts over \$500
	All program policies are available for review at the central office at 5404 No. 107th Plaza, Omaha, NE
	(b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions. The 5-Year and Annual PHA Plan is made available in a manual that is kept in the lobby area of the DCHA offices; it is posted in the community center of the one and only multi-unit complex, North Acres; and it will be posted on the DCHA Web Site once it is approved by the Board of Commissioners. The Fiscal Year Audit report for FYE 2009 is available on the DCHA web site and for review by request at the central office at 5404 No. 107 th Plaza.
	Policy on Violence Against Women Act:
	A Section 8 Housing Choice Voucher participant who is a victim of domestic violence, dating violence or stalking may request and be granted portability due to the incident or threat if they are otherwise compliant with all program obligations and the perpetrator has moved out of the assisted unit.
	In processing a request by a victim for continued assistance the DCHA may request that the victim certify (i.e. police reports) that she/he is a victim of domestic violence, dating violence or stalking, and that the actual or threatened abuse meets the requirements set forth in the Violence Against Women Act. Such certification must include the name of the perpetrator. If the request certification is not provided within 14 business days, assistance will be terminated.
7.0	Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. Include statements related to these programs as applicable. The DCHA does Project Base up to 20% of its allocated Tenant-Based vouchers. At this time that would mean DCHA could utilize 169 of its regular vouchers. This does not include the Mainstream Disabled Vouchers or the Family Unification vouchers.
8.0	Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.
8.1	Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the Capital Fund Program Annual Statement/Performance and Evaluation Report, form HUD-50075.1, for each current and open CFP grant and CFFP financing.
8.2	Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the Capital Fund Program Five-Year Action Plan, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.
8.3	Capital Fund Financing Program (CFFP). Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements

Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.

Housing Needs identified by the DCHA

9.0

- 1. A need for additional affordable rental housing units and preserving affordable rental stock
- 2. Families needing unification and better linkage of housing and supportive services.
- 3. Elderly persons needing support services to remain independent
- 4. Assessable housing for persons with physical disability
- 5. A need to increase homeownership opportunities

9.1	Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan. DCHA Strategies for addressing housing needs in its jurisdiction:
	1. Increase Homeownership opportunities for Section 8 clients
	2. Increase services to special needs population (elderly & disabled) living in DCHA properties
	3. Make application for 50 additional FUP vouchers through the FY 2010 NOFA
	3. Make appreciation for 30 diameters in ough the 11 2010 10171
	Additional Information. Describe the following, as well as any additional information HUD has requested.
	(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan.
	Goal 1 – This Goal has been assigned to the Finance Committee
	The DCHA was awarded \$185,000 from a HUD Grant to provide services coordination for the elderly residents living
	in its low rent housing developments. This grant is for three (3) years and provided money to support the hiring of a Resident Services Coordinator and to pay for program costs
	The DCHA recently acquired 99.99% ownership in a tax credit property that will allow the apartment to remain affordable to low income families.
	The DCHA Finance Committee is moving toward expanding its role in order to focus on the implementation of this goal as part of their responsibility
	Goal 2 – This Goal has been assigned to the Board Policy & Strategic Planning Committee
	The Omaha Housing Authority and the Bellevue Housing Authority participated in a shared board and staff retreat with a focus on leadership and collaboration in the political sector.
	Implemented alternate plan for space utilization when the sale of current office building was not feasible. Remodeled and updated the central office space, and established a Rental Housing Office in the North Cares community space in
	order to free up office space at the central office. Goals 3 – This Goal is the responsibility of board members, staff and the CEO
10.0	By receiving the Resident Services Grant from HUD, the DCHA is now able to assist its elderly residents with support services that will allow them to remain living independently and maintain a healthier lifestyle. The program opened July 2010 and as of September 2010, 100 of the 108 elderly/disabled residents have met with the Resident Services Coordinator.
	Goal 4 – This Goal is the responsibility of board members, staff and the CEO
	_
	There are two of the DCHA board members who serve at the National level for the National Association of Housing and Redevelopment Officials. This provides an opportunity to spread the word about the good work being done by the DCHA.
	The DCHA continues to form partnerships in the community that will facilitate the improvement in the quality of life for its residents.
	The Board Policy and Strategic Planning Committee will be planning a presentation with the local HUD office on the Mission, Vision, Values and Goals of the DCHA.
	Goal 5 - This goal assigned to the BP&SP Committee and the board of commissioners.
	The BP&SP Committee will complete revisions to the Commissioner Handbook and obtain board approval in December 2010 for implementation by January 2011.
	☐ The Board has incorporated the strategic planning goals into the performance evaluation of the CEO.
	(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"
	"A significant amendment or modification to the 5- Year and Annual Plan is defined as discretionary changes in the plans or policies of the housing authority that fundamentally change the plans or policies of the agency and which require formal approval of the Board of Commissioners."

- 11.0 Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.
 - (a) Form HUD-50077, PHA Certifications of Compliance with the PHA Plans and Related Regulations (which includes all certifications relating to Civil Rights)
 - (b) Form HUD-50070, Certification for a Drug-Free Workplace (PHAs receiving CFP grants only)
 - (c) Form HUD-50071, Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only)
 - (d) Form SF-LLL, Disclosure of Lobbying Activities (PHAs receiving CFP grants only)
 - (e) Form SF-LLL-A, Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only)
 - (f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations. For the past few years the DCHA has not been able to get residents to join any type of Resident Advisory Committee or to attend a meeting to review the Draft Agency Plan. This year no resident or client of the low-rent program and the Section 8 program were willing to participate on the Resident Advisory Committee. The DCHA solicited volunteers in its July 2010 Newsletter and no one choice to participate. Our goal is to send a copy of the Draft Agency Plan and to all public housing residents asking for their comments on the plan. A copy of what was sent to the residents is on file for review.
 - (g) Challenged Elements The only challenge DCHA has is the lack of interest by public housing residents and Section 8 clients to participate in the agency annual plan process. DCHA believes that this is primarily due to the lack of interest
 - (h) Form HUD-50075.1, Capital Fund Program Annual Statement/Performance and Evaluation Report (PHAs receiving CFP grants only)
 - (i) Form HUD-50075.2, Capital Fund Program Five-Year Action Plan (PHAs receiving CFP grants only)

This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937, as amended, which introduced 5-Year and Annual PHA Plans. The 5-Year and Annual PHA plans provide a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form is to be used by all PHA types for submission of the 5-Year and Annual Plans to HUD. Public reporting burden for this information collection is estimated to average 12.68 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information, and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

Privacy Act Notice. The United States Department of Housing and Urban Development is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Responses to the collection of information are required to obtain a benefit or to retain a benefit. The information requested does not lend itself to confidentiality

Instructions form HUD-50075

Applicability. This form is to be used by all Public Housing Agencies (PHAs) with Fiscal Year beginning April 1, 2008 for the submission of their 5-Year and Annual Plan in accordance with 24 CFR Part 903. The previous version may be used only through April 30, 2008.

1.0 PHA Information

Include the full PHA name, PHA code, PHA type, and PHA Fiscal Year Beginning (MM/YYYY).

2.0 Inventory

Under each program, enter the number of Annual Contributions Contract (ACC) Public Housing (PH) and Section 8 units (HCV).

3.0 Submission Type

Indicate whether this submission is for an Annual and Five Year Plan, Annual Plan only, or 5-Year Plan only.

4.0 PHA Consortia

Check box if submitting a Joint PHA Plan and complete the table.

5.0 Five-Year Plan

Identify the PHA's Mission, Goals and/or Objectives (24 CFR 903.6). Complete only at 5-Year update.

- **5.1 Mission**. A statement of the mission of the public housing agency for serving the needs of low-income, very low-income, and extremely low-income families in the jurisdiction of the PHA during the years covered under the plan.
- **5.2** Goals and Objectives. Identify quantifiable goals and objectives that will enable the PHA to serve the needs of low income, very low-income, and extremely low-income families.
- **6.0 PHA Plan Update.** In addition to the items captured in the Plan template, PHAs must have the elements listed below readily available to the public. Additionally, a PHA must:
 - (a) Identify specifically which plan elements have been revised since the PHA's prior plan submission.
 - (b) Identify where the 5-Year and Annual Plan may be obtained by the public. At a minimum, PHAs must post PHA Plans, including updates, at each Asset Management Project (AMP) and main office or central office of the PHA. PHAs are strongly encouraged to post complete PHA Plans on its official website. PHAs are also encouraged to provide each resident council a copy of its 5-Year and Annual Plan.

PHA Plan Elements. (24 CFR 903.7)

 Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures. Describe the PHA's policies that govern resident or tenant eligibility, selection and admission including admission preferences for both public housing and HCV and unit assignment policies for public housing; and procedures for maintaining waiting lists for admission to public housing and address any site-based waiting lists.

- 2. Financial Resources. A statement of financial resources, including a listing by general categories, of the PHA's anticipated resources, such as PHA Operating, Capital and other anticipated Federal resources available to the PHA, as well as tenant rents and other income available to support public housing or tenant-based assistance. The statement also should include the non-Federal sources of funds supporting each Federal program, and state the planned use for the resources.
- Rent Determination. A statement of the policies of the PHA governing rents charged for public housing and HCV dwelling units.
- 4. Operation and Management. A statement of the rules, standards, and policies of the PHA governing maintenance management of housing owned, assisted, or operated by the public housing agency (which shall include measures necessary for the prevention or eradication of pest infestation, including cockroaches), and management of the PHA and programs of the PHA.
- Grievance Procedures. A description of the grievance and informal hearing and review procedures that the PHA makes available to its residents and applicants.
- 6. Designated Housing for Elderly and Disabled Families. With respect to public housing projects owned, assisted, or operated by the PHA, describe any projects (or portions thereof), in the upcoming fiscal year, that the PHA has designated or will apply for designation for occupancy by elderly and disabled families. The description shall include the following information: 1) development name and number; 2) designation type; 3) application status; 4) date the designation was approved, submitted, or planned for submission, and; 5) the number of units affected.
- 7. Community Service and Self-Sufficiency. A description of: (1) Any programs relating to services and amenities provided or offered to assisted families; (2) Any policies or programs of the PHA for the enhancement of the economic and social self-sufficiency of assisted families, including programs under Section 3 and FSS; (3) How the PHA will comply with the requirements of community service and treatment of income changes resulting from welfare program requirements. (Note: applies to only public housing).
- 8. Safety and Crime Prevention. For public housing only, describe the PHA's plan for safety and crime prevention to ensure the safety of the public housing residents. The statement must include: (i) A description of the need for measures to ensure the safety of public housing residents; (ii) A description of any crime prevention activities conducted or to be conducted by the PHA; and (iii) A description of the coordination between the PHA and the

- appropriate police precincts for carrying out crime prevention measures and activities.
- Pets. A statement describing the PHAs policies and requirements pertaining to the ownership of pets in public housing.
- 10. Civil Rights Certification. A PHA will be considered in compliance with the Civil Rights and AFFH Certification if: it can document that it examines its programs and proposed programs to identify any impediments to fair housing choice within those programs; addresses those impediments in a reasonable fashion in view of the resources available; works with the local jurisdiction to implement any of the jurisdiction's initiatives to affirmatively further fair housing; and assures that the annual plan is consistent with any applicable Consolidated Plan for its jurisdiction.
- Fiscal Year Audit. The results of the most recent fiscal year audit for the PHA.
- 12. Asset Management. A statement of how the agency will carry out its asset management functions with respect to the public housing inventory of the agency, including how the agency will plan for the long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs for such inventory.
- 13. Violence Against Women Act (VAWA). A description of: 1) Any activities, services, or programs provided or offered by an agency, either directly or in partnership with other service providers, to child or adult victims of domestic violence, dating violence, sexual assault, or stalking; 2) Any activities, services, or programs provided or offered by a PHA that helps child and adult victims of domestic violence, dating violence, sexual assault, or stalking, to obtain or maintain housing; and 3) Any activities, services, or programs provided or offered by a public housing agency to prevent domestic violence, dating violence, sexual assault, and stalking, or to enhance victim safety in assisted families.
- 7.0 Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers
 - (a) Hope VI or Mixed Finance Modernization or Development. 1) A description of any housing (including project number (if known) and unit count) for which the PHA will apply for HOPE VI or Mixed Finance Modernization or Development; and 2) A timetable for the submission of applications or proposals. The application and approval process for Hope VI, Mixed Finance Modernization or Development, is a separate process. See guidance on HUD's website at: http://www.hud.gov/offices/pih/programs/ph/hope6/index.cfm
 - (b) Demolition and/or Disposition. With respect to public housing projects owned by the PHA and subject to ACCs under the Act: (1) A description of any housing (including project number and unit numbers [or addresses]), and the number of affected units along with their sizes and accessibility features) for which the PHA will apply or is currently pending for demolition or disposition; and (2) A timetable for the demolition or disposition. The application and approval process for demolition and/or disposition is a separate process. See guidance on HUD's website at:

http://www.hud.gov/offices/pih/centers/sac/demo_dispo/index.cfm

Note: This statement must be submitted to the extent **that approved and/or pending** demolition and/or disposition has changed.

- (c) Conversion of Public Housing. With respect to public housing owned by a PHA: 1) A description of any building or buildings (including project number and unit count) that the PHA is required to convert to tenant-based assistance or that the public housing agency plans to voluntarily convert; 2) An analysis of the projects or buildings required to be converted; and 3) A statement of the amount of assistance received under this chapter to be used for rental assistance or other housing assistance in connection with such conversion. See guidance on HUD's website at: http://www.hud.gov/offices/pih/centers/sac/conversion.cfm
- (d) Homeownership. A description of any homeownership (including project number and unit count) administered by the agency or for which the PHA has applied or will apply for approval.
- (e) Project-based Vouchers. If the PHA wishes to use the project-based voucher program, a statement of the projected number of project-based units and general locations and how project basing would be consistent with its PHA Plan.
- 8.0 Capital Improvements. This section provides information on a PHA's Capital Fund Program. With respect to public housing projects owned, assisted, or operated by the public housing agency, a plan describing the capital improvements necessary to ensure long-term physical and social viability of the projects must be completed along with the required forms. Items identified in 8.1 through 8.3, must be signed where directed and transmitted electronically along with the PHA's Annual Plan submission.
 - 8.1 Capital Fund Program Annual Statement/Performance and Evaluation Report. PHAs must complete the Capital Fund Program Annual Statement/Performance and Evaluation Report (form HUD-50075.1), for each Capital Fund Program (CFP) to be undertaken with the current year's CFP funds or with CFFP proceeds. Additionally, the form shall be used for the following purposes:
 - (a) To submit the initial budget for a new grant or CFFP;
 - (b) To report on the Performance and Evaluation Report progress on any open grants previously funded or CFFP; and
 - (c) To record a budget revision on a previously approved open grant or CFFP, e.g., additions or deletions of work items, modification of budgeted amounts that have been undertaken since the submission of the last Annual Plan. The Capital Fund Program Annual Statement/Performance and Evaluation Report must be submitted annually.

Additionally, PHAs shall complete the Performance and Evaluation Report section (see footnote 2) of the *Capital Fund Program Annual Statement/Performance and Evaluation* (form HUD-50075.1), at the following times:

- At the end of the program year; until the program is completed or all funds are expended;
- When revisions to the Annual Statement are made, which do not require prior HUD approval, (e.g., expenditures for emergency work, revisions resulting from the PHAs application of fungibility); and
- Upon completion or termination of the activities funded in a specific capital fund program year.

8.2 Capital Fund Program Five-Year Action Plan

PHAs must submit the *Capital Fund Program Five-Year Action Plan* (form HUD-50075.2) for the entire PHA portfolio for the first year of participation in the CFP and annual update thereafter to eliminate the previous year and to add a new fifth year (rolling

- basis) so that the form always covers the present five-year period beginning with the current year.
- 8.3 Capital Fund Financing Program (CFFP). Separate, written HUD approval is required if the PHA proposes to pledge any portion of its CFP/RHF funds to repay debt incurred to finance capital improvements. The PHA must identify in its Annual and 5-year capital plans the amount of the annual payments required to service the debt. The PHA must also submit an annual statement detailing the use of the CFFP proceeds. See guidance on HUD's website at:

 http://www.hud.gov/offices/pih/programs/ph/capfund/cffp.cfm
- 9.0 Housing Needs. Provide a statement of the housing needs of families residing in the jurisdiction served by the PHA and the means by which the PHA intends, to the maximum extent practicable, to address those needs. (Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).
 - 9.1 Strategy for Addressing Housing Needs. Provide a description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. (Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).
- **10.0** Additional Information. Describe the following, as well as any additional information requested by HUD:
 - (a) Progress in Meeting Mission and Goals. PHAs must include (i) a statement of the PHAs progress in meeting the mission and goals described in the 5-Year Plan; (ii) the basic criteria the PHA will use for determining a significant amendment from its 5-year Plan; and a significant amendment or modification to its 5-Year Plan and Annual Plan. (Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).
 - (b) Significant Amendment and Substantial Deviation/Modification. PHA must provide the definition of "significant amendment" and "substantial deviation/modification". (Note: Standard and Troubled)

- PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan.)
- (c) PHAs must include or reference any applicable memorandum of agreement with HUD or any plan to improve performance. (Note: Standard and Troubled PHAs complete annually).
- 11.0 Required Submission for HUD Field Office Review. In order to be a complete package, PHAs must submit items (a) through (g), with signature by mail or electronically with scanned signatures. Items (h) and (i) shall be submitted electronically as an attachment to the PHA Plan
 - (a) Form HUD-50077, PHA Certifications of Compliance with the PHA Plans and Related Regulations
 - (b) Form HUD-50070, Certification for a Drug-Free Workplace (PHAs receiving CFP grants only)
 - (c) Form HUD-50071, Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only)
 - (d) Form SF-LLL, Disclosure of Lobbying Activities (PHAs receiving CFP grants only)
 - (e) Form SF-LLL-A, Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only)
 - (f) Resident Advisory Board (RAB) comments.
 - (g) Challenged Elements. Include any element(s) of the PHA Plan that is challenged.
 - (h) Form HUD-50075.1, Capital Fund Program Annual Statement/Performance and Evaluation Report (Must be attached electronically for PHAs receiving CFP grants only). See instructions in 8.1.
 - (i) Form HUD-50075.2, Capital Fund Program Five-Year Action Plan (Must be attached electronically for PHAs receiving CFP grants only). See instructions in 8.2.

Par	t I: Summary						
	PHA Name/Number: Douglas County Housing Authority – NE153		Locality (Omaha	/Douglas/Nebraska)	⊠Original 5-Year Plan □Revision No:		
A.	Development Number and Name – PHA Wide NE153000006	Work Statement for Year 1 FFY 2011	Work Statement for Year 2 FFY 2012	Work Statement for Year 3 FFY <u>2013</u>	Work Statement for Year 4 FFY <u>2014</u>	Work Statement for Year 5 FFY 2015	
В.	Physical Improvements Subtotal		\$59,890	\$51,890.00	\$59,390.00	\$49,900.00	
C.	Management Improvements		\$3,000.00	\$3,000.00	\$3,000.00	\$3,000.00	
D.	PHA-Wide Non-dwelling Structures and Equipment		\$6,500.00	\$14,000.00	\$6,500.00	\$16,490.00	
E.	Administration		\$6,000.00	\$6,500.00	\$6,500.00	\$6,000.00	
F.	Other		-0-	-0-	-0-	-0-	
G.	Operations		\$45,000.00	\$45,000.00	\$45,000.00	\$45,000.00	
H.	Demolition						
I.	Development		-0-				
J.	Capital Fund Financing – Debt Service		-0-	-0-	-0-	-0-	
K.	Total CFP Funds		\$120,390	\$120,390	\$120,390	\$120,390	
L.	Total Non-CFP Funds						
M.	Grand Total	\$120,390	\$120,390	\$120,390	\$120,390	\$120,390	

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Part	I: Summary (Continua	tion)				
PHA	Name/Number		Locality (City/	county & State)	Original 5-Year Plan	Revision No:
A.	Development Number and Name	Work Statement for Year 1 FFY	Work Statement for Year 2 FFY	Work Statement for Year 3	Work Statement for Year 4 FFY	Work Statement for Year 5 FFY
		Annual Statement				

Work	Wor	k Statement for Year 2013	_	Work Statement for Year: 2014			
Statement for		FFY <u>2012</u>			FFY <u>2013</u>		
Year 1 FFY 2009	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	
See	NE153000006			NE153000006			
Annual							
Statement	PHA Wide Work Items:			PHA Wide Work Items:			
	 Refrigerators 	4	\$1600	Refrigerators	3	\$1300	
	• Stoves	4	\$1400	• Stoves	3	\$1050	
	Water Heaters	2	\$700	Water Heaters	2	\$700	
	 Carpeting 	5	\$9000	• Carpeting	5	\$9000	
	Storm doors	2	\$400	Storm doors	2	\$400	
	Interior Painting	4	\$2500	Interior Painting	4	\$2500	
	Exterior Painting	2	\$1200	Exterior Painting	2	\$1800	
	Deck Repairs	2	\$2000	Deck Repairs	2	\$2000	
	• Flooring	4	\$2000	Flooring	3	\$1500	
	Air Conditioners	3	\$8250	Air Conditioners	3	\$8250	
	• Furnaces	3	\$8250	Furnaces	3	\$8250	
	Concrete & Asphalt Work	2	\$4990	Concrete Work	2	\$4490	
	Tree Trimming	1	\$1000	Tree Trimming	1	\$1000	
	Siding/Stucco	3	\$12500	Siding/Stucco	1	\$6000	
	Window Covering	0	\$0	Window Covering	0	\$0	
	Sprinkler System	1	\$1000	Sprinkler System	1	\$500	
	Pest Control	2	\$2000	Pest Control	2	\$2000	
	Subtot	al of Estimated Cost	\$59,890	Subtot	al of Estimated Cost	\$51,890	

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Part II: Sup	porting Pages – Physica	al Needs Work Staten	nent(s)			
Work	Wo	ork Statement for Year 2015	5	Work	Statement for Year: 2016	
Statement for		FFY <u>2014</u>			FFY <u>2015</u>	
Year 1 FFY	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See	NE153000006			NE153000006		
Annual						
Statement	PHA Wide Work Items:			PHA Wide Work Items:		
	Refrigerators	4	\$1600	 Refrigerators 	4	\$1600
	• Stoves	4	\$1400	• Stoves	4	\$1400
	Water Heaters	2	\$700	Water Heaters	2	\$800
	Carpeting	5	\$9000	• Carpeting	5	\$9000
	Storm doors	2	\$400	Storm doors	1	\$200
	Interior Painting	4	\$2500	Interior Painting	4	\$2500
	Exterior Painting	2	\$1800	Exterior Painting	2	\$1800
	Deck Repairs	2	\$2000	Deck Repairs	1	\$1000
	Flooring	3	\$1500	Flooring	3	\$1500
	Air Conditioners	4	\$11000	Air Conditioners	3	\$8250
	Furnaces	4	\$11000	Furnaces	3	\$8250
	Concrete Work	3	\$5890	Concrete Work	1	\$3000
	Tree Trimming	1	\$1000	Tree Trimming	1	\$1000
	Siding/Stucco	1	\$6000	Siding/Stucco	1	\$6000
	Window Covering	0	\$0	Window Covering	0	\$0
	Sprinkler System	1	\$500	Sprinkler System	1	\$500
	Pest Control	2	\$2000	Pest Control	2	\$2000
	Subto	otal of Estimated Cost	\$59,390	Subtot	tal of Estimated Cost	\$49,900

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Part III: Suj	pporting Pages – Management Needs Work	Statement(s)			
Work	Work Statement for Year 2013	3	Work Statement for Year: 2014 FFY 2013		
Statement for	FFY <u>2012</u>				
Year 1 FFY	Development Number/Name	Estimated Cost	Development Number/Name	Estimated Cost	
<u>2009</u>	General Description of Major Work Categories		General Description of Major Work Categories		
See					
Annual					
Statement					
	PHA Wide Work Items:		PHA Wide Work Items:		
	General Operations (1406)	\$45000	General Operations (1406)	\$45000	
	Coordination and Administration of the CFP Grant	\$6000	Coordination and Administration of the CFP Grant	\$6500	
	Community Center at North Acres and Office Rehab & Repair	\$2000	Community Center at North Acres and Office Rehab & Repair	\$2000	
	Computer Software Upgrade & Software Training	\$3000	Computer Software Upgrade & Software Training	\$3000	
	Computers; Printers; Office Furniture & Fixtures; Replacement of company vehicles	\$4500	Computers; Printers; Office Furniture & Fixtures; Replacement of company vehicles	\$12000	
	Subtotal of Estimated Cost	\$60,500	Subtotal of Estimated Cost	\$68,500	

Part III: Su	pporting Pages – Management Needs Work	Statement(s)			
Work	Work Statement for Year 2015		Work Statement for Year: 2016 FFY 2015		
Statement for	FFY 2014				
Year 1 FFY	Development Number/Name	Estimated Cost	Development Number/Name	Estimated Cost	
	General Description of Major Work Categories		General Description of Major Work Categories		
See					
Annual					
Statement					
	PHA Wide Work Items:		PHA Wide Work Items:		
	General Operations (1406)	\$45000	General Operations (1406)	\$45000	
	Coordination and Administration of the CFP Grant	\$6500	Coordination and Administration of the CFP Grant	\$6000	
	Community Center at North Acres and Office	\$2000	Community Center at North Acres and Office	\$2000	
	Rehab & Repair		Rehab & Repair		
	Computer Software Upgrade & Software Training	\$3000	Computer Software Upgrade & Software Training	\$3000	
	Computers; Printers; Office Furniture & Fixtures;	\$4500	Computers; Printers; Office Furniture & Fixtures;	\$14490	
	Replacement of company vehicles		Replacement of company vehicles		
		* * * * * * * * * * * * * * * * * * *		Φ=0.400	
	Subtotal of Estimated Cost	\$61,000	Subtotal of Estimated Cost	\$70,490	
